Wisconsin Department of Safety and Professional Services Mail To: P.O. Box 8935 Office Location: 4822 Madison Yards Way

Madison, WI 53705 FAX #: (608) 267-0592

Phone #: (608) 266-2112

Madison, WI 53705

E-Mail: <u>dspssbmanfhomes@wisconsin.gov</u>

Website: http://dsps.wi.gov

PERMISSION TO PICK UP OR DELIVER TITLE

Permission is required for the Wisconsin Department of Safety and Professional Services to deliver a title to someone other than the registered owner.

Owner Infor	mation					
Owner(s)						
Manufacture	ed Home Informa					
Serial Ident	tification Number	Year	Make			
		e my permission for the person or business iden		iver, in person ¹	or by mail, th	ne title for the
Name of Pe	erson Picking Up Tit	le:				
Company N	Name (if applicable)	:				
Address		Street		City	State	Zip
Signa	ature of owner/co	o-owner is required:				
X _				Dated:		
		Owner Name				
X _				Dated:		
		Co-Owner Name				

¹ You will be required to show a valid Identification Card or Diver's License from Wisconsin or another jurisdiction. If you do not have your Driver License or ID card with you, we will mail the title to the owner of the manufactured home. One \$15 window fee applies to in person transactions.